

THE METROHEALTH SYSTEM

QUALITY & SAFETY COMMITTEE

BOARD OF TRUSTEES

REGULAR MEETING MINUTES

DATE: May 9, 2018

TIME: 12:00 p.m.

PLACE: MetroHealth Medical Center
K107, Business Services Building

COMMITTEE

TRUSTEES: Mr. Moss, Dr. Silvers

STAFF: Dr. Boutros, Dr. Boulanger, Ms. Abramov, Mr. Chadwick, Ms. Connelly, Mr. Gutridge, Dr. Golob, Mr. Kaufmann, Ms. Kedio, Ms. Kline, Mr. Kucerra, Ms. McBride, Dr. Mercer, Ms. Platten, Mr. Stern, Dr. Watts, Dr. Wera, Dr. Werner, Dr. Wilber, Ms. Yurkovich

(ABSENT): Dr. Chehade, Dr. Kasprzak, Mr. McDonald

Mr. Moss called the regular meeting of the Quality & Safety Committee to order at 12:06 p.m.

I. Approval of Minutes – February 14, 2018

The minutes of the February 14, 2018 Quality & Safety Committee Meeting were approved as presented.

II. DISCUSSION ITEMS

A. Introduction of New Members – Brook Watts, M.D.

Dr. Watts announced that Dr. Joseph Golob, Medical Director of Patient Safety, Dr. Brian Mercer, Council of Chairs Representative, Larry Chadwick, Vice President Hospital Operations, Marina Abramov, RN, Nursing Representative, Dr. Timothy Kasprzak and/or Dr. Sandra Werner, Medical Staff President and Michael Gutridge, Pharmacy Representative are new committee members for the Quality & Safety Committee.

B. Orthopedics Quality Improvement – Dr. Glenn Wera

Dr. Wera stated the purpose of this discussion is to define readmission reduction measures in Orthopaedic Total Joint Replacement Surgery from September 2016 to the present. There are over 700,000 total knee replacements and 230,000 total hip replacements per year in the United States. Complications such as infection and failures vary by institution. Medicare expenditure varies from \$16,500 to \$33,000.

MetroHealth's goal is 1,000 cases per year. Many factors have been linked to readmission after total joint arthroplasty such as race, male, discharge to inpatient rehabilitation, increase duration of hospital stay, unilateral replacement, decreased age, decreased distance between home and the hospital, and total knee replacement. Obesity has been linked to 30-day complications after total joint arthroplasty. Areas that can help reduce readmissions would be to educate and enforce an ultra-clean mentality, x-ray shield so staff do not have to leave, minimize traffic, and clean each room for each joint, and dedicate total joint teams. Next steps will include further improvements in Anesthetic Methods (spinal regional), length of stay (the other quality measure), profitability of cases and resist regression to the mean.

C. 2018 Goals Update – Matthew Kaufmann

Mr. Kaufmann presented the reports for ACO Quality Metrics, Hospital Performance for Decreased ED Time After the Decision to Admit, IP Discharge Time of Day, Care Pathways Developed and Implemented, PSI 90 Composite, HAI Reduction, SSI Reduction, 30-Day Readmissions, Sharp Injuries, Order Set Utilization, TeamSTEPPS Implementation, and Care Equitability.

D. Organization QI Education (IHI) – Matthew Kaufmann

Mr. Kaufmann stated that the IHI Educational Program is targeted at physicians and nurses. The course outline consists of basics of improvement science, process maps and PDSA, measurement and understanding variability, run and control charts and leading PI and scaling up. So far, they have received positive feedback, positive evaluations and requests for more sessions.

E. Joint Commission Preparation – Ms. Kelly Connelly

Ms. Connelly stated that presently we are in the window for two Joint Commission surveys. An extension survey for both Parma and Cleveland Heights inpatient units can occur between now and the end of June. Our organizational triennial survey visit can occur between now and the end of November. A combined survey is also a possibility. The Quality Institute has been preparing staff for the surveys by performing monthly organizational tracers since November. The tracers include visits to the various units, ambulatory sites, and remote hospitals ensuring compliance related to environment of care, infection control, safety and quality. The findings are shared with leadership and presented at monthly Accreditation and Compliance Oversight Committee meetings. Arrival plans have been completed in preparation for both surveys. The escort team has been established for the assigned surveyors for the week of the triennial visit and have met to discuss roles and responsibilities. Throughout April they will meet with ten

multidisciplinary teams that will be required to meet with the surveyors during the triennial week-long visit to discuss identified topics. In the event that there will be two surveys, we will continue to perform tracers, work to resolve any outstanding concerns and continue to educate and coach staff on survey preparedness.

III. NON-CONSENT/ACTION ITEMS

None

IV. CONSENT ITEMS

None

There being no further business to come before the Committee, the meeting was adjourned at 1:37 p.m.

Respectfully,

Mr. John Moss, Chairman
Board of Trustees